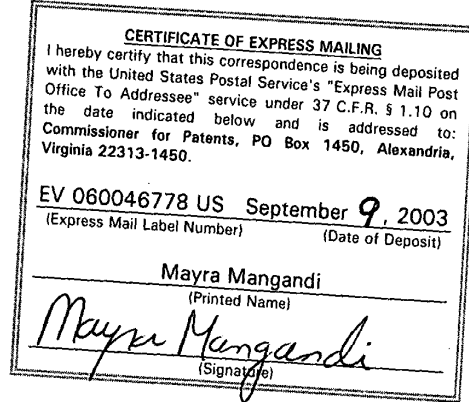




Atty. Dkt. No. 036366-0101

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richard MALCHAR
Title: AN ABDOMINAL AND TORSO
STRENGTHENING APPARATUS
Appl. No.: Unknown
Filing Date: Concurrently herewith
Examiner: Unknown
Art Unit: Unknown



UTILITY PATENT APPLICATION
TRANSMITTAL

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Richard MALCHAR
5720 Valley Oak Drive
Los Angeles, California 90068

☒ [X] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ [X] Specification, Claim(s), and Abstract (11 pages).

☒ [X] Informal drawings (3 sheets, Figures 1, 2, 3).

- ☒ Declaration and Power of Attorney (3 pages).
- ☐ Assignment of the invention to ASSIGNEE_COMPANY_NAME.
- ☐ Assignment Recordation Cover Sheet.
- ☐ Small Entity statement.
- ☒ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ___ listed reference(s).
- ☒ Application Data Sheet (37 CFR 1.76).
- ☐ Claim for Convention Priority.

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	14	- 20	= 0	x \$18.00	= \$0.00
Independents	1	- 3	= 0	x \$84.00	= \$0.00
:					
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
				SUBTOTAL:	= \$750.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$375.00
				TOTAL FILING FEE:	= \$375.00

- ☒ A check in the amount of \$375.00 to cover the filing fee is enclosed.
- ☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed

herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

September 9, 2003

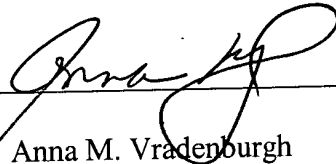
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By



Anna M. Vradenburgh
Attorney for Applicant
Registration No. 39,868

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REQUEST AND CERTIFICATION UNDER 35 U.S.C. 122(b)(2)(B)(i)

Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Applicant hereby certifies that the invention disclosed in the attached application has not and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. Applicant hereby requests that the attached application not be published under 35 U.S.C. 122(b).

Respectfully submitted,

Date

September 9, 2003

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By

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